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The Canadian Nurse

A MONTHLY JOURNAL FOR THE NURSING PROFESSION IN CANADA

VOL. III. TORONTO, JANUARY, 1907. No. 1

AN ADDRESS.*

I think it is four years since I last had the pleasure of presenting the diplomas to the graduating nurses of the Royal Victoria Hospital. Such an occasion always seems to me to be at once of a festive and of a serious character. No doubt it is under that twofold aspect that it appears to you, the graduating nurses. For it is to you an end and a beginning, the end of a long course of arduous preparation, the beginning of a career to which you have long looked forward, a career now justly recognized to be one of the highest, noblest and best that can be followed by women. Yes, to no profession can the word "noble" be more fitly applied than to that of the trained nurse. We can all recognize and try to realize the truth of dear George Herbert's familiar lines, "Who sweeps a room unto the Lord makes that and the action fine." Yet we cannot but feel that there is a difference; that some work stands *per se* on a higher plane than other work. The question is not whether work be paid or unpaid (though I may say in passing, that the world has a curious way of concluding that the nobler a profession is the less should the public pay for it!) the question is not whether the nurse goes forth to her work clad in the ordinary hospital uniform or in the garb of some religious order. The care of the sick, the relief of the suffering, the saving of life, is a noble work in itself quite apart from all such considerations, and whether or not it is pursued in a noble manner rests solely with the spirit in which it is done.

Some of you may have read that delightful book, "The Life and Letters of James Hinton," by the late Miss Ellice Hopkins. Her very name is an inspiration to us all. You know how she, a woman of delicate physique, gave up her whole life for the alleviation of sin and suffering under some of its worst forms, at a time, too, when the world still thought it an indelicate thing for a woman to know anything of a form of sin and suffering which bears most heavily on her own sex. When this little woman, braving public opinion, and without any special gifts of oratory, told her story and made her appeal from the platform, I have been

*To the graduating nurses of the Royal Victoria Hospital, 1906.

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told that she even made Bishops weep. This way of putting it seemed to me a little hard on the Bishops, whom I have always found, so far as my own experience goes, as soft-hearted as other men. However, I suppose they have to be more careful about their dignity. But this is a digression. What I started to say was that James Hinton, being a doctor himself, used to give to trained nursing even a higher rank than the practice of medicine. He wondered, indeed, how any woman could condescend to be a doctor who had the chance of being a nurse. He used to say, "When a commonplace young man says, 'I want to be a doctor,' I say,' Very well,' because I daresay he will do well enough. And if a commonplace girl wants to be a doctor I take it for granted she will do well enough, too. But if a girl says, 'I want to be a nurse,' I begin to consider whether she has the requisite qualifications."

So high an ideal might be alarming, might be discouraging, were it not that it calls for just those special qualities of character which are most "true womanly," for gentleness and sympathy, and patience, and tact, and all that is wrapt up in the heart of motherhood.

And without making odious comparisons, may I say that our Canadian nurses should be, and I believe are, specially known by these characteristics. It is, for instance, an acknowledged fact that across the line, Canadian nurses are generally preferred. I have been told that this is because they have more staying power,—but this staying power, this reserve force, in so far as it derives from a less tense and highly wrought nervous organization,—must imply more repose of manner, a lower tone to the voice and generally more of that quietude which is so soothing in a sick room.

Then if we take the qualities of tact and adaptability where have we larger opportunities for acquiring them than in Canada, where things are still, as some would say, in the rough, where our roads, in a spiritual as well as in a literal sense, are full of "cahots," and we are sure to be dreadfully bumped about if we hold ourselves too stiff! It was in England, where the roads are smooth and rules can afford to be more rigid, that we had to part with a capable and conscientious nurse who was taking night duty in the serious illness of a near relative of mine, because of this lack of adaptability. Every morning the nurse told the doctor how many hours to the minute her patient had slept, every morning the patient indignantly disclaimed the soft impeachment, she had not slept half that amount, she had only lain quiet with her eyes shut. The nurse maintained her position, she knew by the breathing and so on. At last the patient felt her presence intolerable, she was afraid to shut her eyes at night, in case nurse should triumph—so there was nothing for it but to ask her to depart.

Now it is never a graceful thing to boast, it is a better thing to recognize that we *all* have the qualities of our defects and the defects of our qualities. But I feel about the trained nurse in

Canada that her hospital course drills her out of what some might call our national defects—our lack of order and method, of attention to detail—our "*through-other*" way of doing things; whereas the qualities of which these faults are the other side are constantly called into exercise by the conditions of life in a country where all is in the making.

So it is with a confident hope and with a pardonable pride that we bid our nurses go forth to-day to the work of their high calling. Of all work it is true that "the worker has but a span of time, a brief opportunity, a failing strength"—happily to-day under the improved conditions of a nurse's life, this is hardly more true of your work than of any other calling—but of your work especially it may be said that if the work is great, so also—in ways that cannot be told—is the joy of the reward.

JULIA DRUMMOND.

448 Sherbrooke St. W., Montreal.

THE CARE OF NERVOUS PATIENTS.

Many physicians consider this branch of nursing more difficult and exacting than the care of acute medical or surgical cases. Nervous irritability in any form of sickness adds largely to the nurse's difficulties, and in functional derangements of the nervous system it is always a prominent feature of the case. Further, the mental state of the patient is often such that it is difficult to distinguish his peculiarities from the delusions of insanity. He frequently shows antipathy to members of his family, and this may unfortunately extend to, and include the nurse.

Any one or all of the senses may become abnormally developed, and the nurse kept busy trying to protect her patient from the things which cause annoyance. Perfume on some has a peculiarly depressing effect. With others the sense of taste is abnormal. Some find that any articles of food containing salt burn the tongue and stomach. In one case the bread and butter had to be absolutely saltless, the vegetables when cooked in water with a very little salt caused acute pain, likewise even the normal salt in beef caused trouble. Others again find all seasonings and flavorings nauseating. As for color, blue in all its shades may prove most depressing, whereas yellow and green may be soothing. Perhaps the sense of hearing is the one with which the nurse may have most trouble. Noise or sounds that to a healthy person would not be noticeable, to the patient may prove most distressing. A case in point. In one of the large well-built homes in New York, a mother was ordered by her physician to take the rest-treatment. Much against the doctor's will it was finally decided to give it to her in her own

home, and accordingly she was isolated on the third floor, seeing no person but her physician and nurse. The telephone was two floors below, and that telephone bell never rang night or day, but she heard it, and worried if it were not answered at once, and no matter how low the voice was she could hear the conversation. If any person called she knew if he came in, and often knew by the voice who it was. In some way she appeared to know everything that went on in the house. This, of course, was no rest, and after a couple of weeks' trial it was decided she would have to leave home and go with her nurse to some place where even if she did hear the sounds they would have no personal significance. After a few weeks there was a marked improvement in her condition, and although her hearing was still acute, she could not hear, or did not notice, sounds as she had previously, and in time made a complete recovery.

In such conditions doctors have found drugs of little or no avail, and indeed they often prove most harmful, as when the patient has for temporary relief used stimulants, hypnotics or anodynes.

In Dr. S. Weir Mitchell's book, Fat and Blood, he says: "A good brisk daily walk is for well folks a tonic, breaks down the tissues and creates a wholesome demand for food. The same is true for some sick people. The habit of horse-exercise, or a long walk every day is needed to cure, or to aid in the cure of disordered stomach and costive bowels; but if all exertion gives rise only to increase of trouble, to extreme sense of fatigue, to nausea, to headache, what shall we do? And suppose that tonics do not help to make exertion easy, and that the great tonic of change of air fails us, shall we still persist? They may be able to drag themselves about but no good will be done by making them do so."

The rest-cure for many such cases has proven most beneficial. This rest-cure now so generally used for nervous exhaustion consists of rest in bed, isolation, fattening or plenteous nourishment, and the use of massage and electricity, modified and prescribed by the physician to suit the individual case.

"The normal uses of enforced rest," again says Dr. Mitchell, "are readily estimated. From a restless life of irregular hours, and probably endless drugging, from hurtful sympathy and overzealous care, the patient passes to an atmosphere of quiet, to order and control, to the system and care of a thorough nurse, to an absence of drugs, and to simple diet. The result always is at first, whatever it may be afterwards, a sense of relief, and a remarkable and often a quite abrupt disappearance of many of the nervous symptoms with which we are all of us only too sadly familiar."

Many patients are so exhausted they are quite willing to crawl into bed and rest, but by far the greater number are in

such a nervous and irritable condition that it takes several days before the nerves become sufficiently quiet to allow them to rest.

As for isolation, that is always according to the physician's orders. It is usually rigid only in extreme cases.

The question of nourishment is most important. In many cases there is extreme emaciation caused by stomach complications, and because of pain during or after eating, the patient has cut down the diet to starvation point, with the result that the stomach grows smaller and loses its ability to digest what little food it gets. Such cases require most careful attention. The patient has so lost confidence in the power of the stomach to handle any food that the nurse often finds it hard to persuade her patient to take the increased quantity or variety necessary. Then again, there may have been no pain at any time, and the patient may even have felt hungry, but after a few mouthfuls has such a sense of fulness that she can take no more. In such cases forced feeding is most helpful, and in time results in a good appetite.

Mrs. T. four years previously had had a panhysterectomy performed. When she came for treatment she was five feet seven inches (5 ft. 7 in.) in height, and weighed 78 lbs. Nothing she took in the form of food agreed with her, everything caused pain. Finally the doctor ordered warm peptonized milk, ℥ vi., and the white of one egg to be given at 7 a.m. This she said caused her great distress. At 9 a.m. she was ordered lavage and the doctor told her he was going to order her some medicine which was to be poured down the tube and left in the stomach. This, he assured her would give her great relief. This order consisted of the whole of two eggs, gluten ℥ i. and warm pept. milk and cream ℥ xvi. In a few days she told the doctor how well she felt after that "medicine." This was kept up for three weeks, and at the end of that time she was told what the "medicine" was. Of course she refused to believe that her stomach could handle any food with such comfort, much less such a quantity; but seeing was believing, and after this she did not complain so much of the other nourishment giving her pain, and by degrees it was increased in quantity.

In many cases there is a prolapse of the stomach, and often dilatation. This relaxed condition of the muscles prevents the stomach from emptying as quickly as it should, with the result that fermentation is set up, often causing great distress. Tone and vigor is given to the digestive organs by the kneading of the muscles or massage, thus enabling them to handle larger amounts of food with comfort and even with relish, and what at first was merely a fictitious appetite becomes in time a real one.

Again to quote from "Fat and Blood": "Let us think then when we put a person in bed that we are lessening the heart beats some twenty a minute, nearly a third; that we are causing the tardy blood to linger in by-ways of the blood-round, for it has its by-ways; that rest in bed binds the bowels and tends to

destroy the desire to eat; and that the muscles at rest too long get to be unhealthy and shrunken in substance. Bear these ills in mind and be ready to meet them, and we shall have answered the hard question of how to help by rest without hurt to the patient."

It is estimated that a thorough treatment of massage is equal to a five-mile walk without the loss of nervous energy entailed by the walk. The massage increases the circulation, and by actual test has been known in many cases to have increased the number of red corpuscles in the blood by 50 per cent. This in turn aids assimilation and digestion.

In a case of albuminuria from exercise Dr. W. W. Keen has shown that massage did not cause the return of albumin after rest, though exercise did, a difference due to the opposite effects upon the blood pressure of the two forms of activity.

The pulse should be slower and stronger after an hour of deep massage.

"The use of lubricants is a favorite device of unskilled manipulator," says Dr. Mitchell. "It also does away with much of the good effected by skin friction, is uncleanly, very annoying to many patients, promotes an unsightly growth of hair and should be avoided except where it is desired to rub into the system some oleaginous material. There are exceptional cases where a very dry hard skin or a tendency to excessive sweating during massage makes the use of some unguent desirable."

"So many nervous people are worried with indecision, with inability to make up their minds to the simplest actions, that to have the responsibility of choice taken away greatly lessens their burdens." In one of Dr. S. Weir Mitchell's lectures to nurses he said: "A nurse for nervous patients should be a happy bright person, pretty if possible, and tidy, but above all else she must have a good deal of will-power and tact, for many times she may have to *will* for two."

Along this line Anna ——, age 17 years, had a year and a half previously had a severe attack of grip, which left her quite exhausted. She was allowed to get up too soon and in making an attempt to walk, not having the strength, sank to the floor. From that time on she was so convinced that she could not walk, that she would not even try. Her parents were most indulgent and matters had gone from bad to worse till finally at the end of eighteen months she was put in the hands of Dr. ——, who made a thorough examination. There was a marked hypersthesia of the whole body, and the only person who could do anything for her without causing pain was her father. While examining her spine the doctor touched a particularly sore spot between the shoulders. The patient winced, and the mother, who was sitting across the room, cried out: "Oh! that is Anna's sore spot." The doctor asked the mother: "Did I hurt you?" and forthwith she was asked to leave the room.

By the aid of the doctor on one side and the nurse on the other

the patient after half an hour's trial took one step and was then lifted back to bed. Next day in the same way she took two steps, and next day four, etc. At the end of the first week she would take a few steps by the aid of the nurse at one side and holding to the bed on the other, and at the end of five weeks went several blocks alone.

Now Anna was not an obstinate girl, nor do I believe she tried to deceive people, she simply had not the strength on her first attempt and in her weakened condition she allowed herself to think she could not walk, and until she was much stronger in body and met some person with a sufficiently strong will to control her she did not even try, being convinced in her own mind that she was paralyzed in the lower limbs.

We may be inclined to be harsh in our judgment of nervous people, but could we fully realize what they suffer in many cases, our criticism would be kinder and we would put forth our best efforts to help them.

ELIZABETH W. ROGERS.

A DEMONSTRATION OF SOME NURSING METHODS.

On Wednesday, November the 14th, the Montreal General Hospital Graduate Nurses' Club held a meeting in the amphitheatre of the hospital. The afternoon's programme began with an interesting and timely address by Dr. Helen MacMurchy on Opsonic Work. Dr. MacMurchy's description of Sir Almroth Wright's investigations and her explanations of the subject were clear and simple, the nurses thoroughly enjoyed her paper. Following this a demonstration of some nursing methods was given by Miss Young, Assistant Superintendent, and Miss Tedford and Miss Strum, staff nurses; Miss Shaw, instructor in the Training School, explained the work as it was being done.

The following detailed directions for such a demonstration have been written for THE CANADIAN NURSE at Dr. MacMurchy's request.

1. Changing a mattress with a patient in bed.

Remove the counterpane, pillows and extra blankets, leaving the patient covered with the sheet and one blanket. Loosen these all around and fold up at either side. Tuck the folded bed-clothing *smoothly* and *tightly* under and around the patient, first on one side then at the end, lastly the other side, making as it has been called "a mummy of one's patient." Now loosen the under sheet, bed rubber and draw sheet and remove them, while doing so, drawing the patient to the left side of the mattress. The help of a second person will now be required. Draw the mattress nearly half off the bed at the right side and have one person hold it. Place three pillows, end to end, on the left side of the bedstead, tucking their

edges under the edge of the mattress, so as to hold them in place. Unless the patient is very slight a third person's help will now be necessary. Have all three persons stand close together at the left side and thus lift the patient from the mattress to the pillows Then have the mattress turned and the patient lifted back in the same manner. By lifting from *one side* and *at the same moment,* lifting is made much easier; having the bed clothing tightly tucked about the patient facilitates handling, and at the same time makes the necessary handling more comfortable for the patient. After this draw the mattress into position, removing the pillows, and make the bed in the usual manner.

2. Methods of Supporting a Patient.

(1) Back Rest and Pillows.—Remove the pillow, have the back rest or chair covered with a sheet. Have the patient lifted up, slip in the rest or chair, put two oblong pillows lengthwise against it, placing one *over* the other at the bottom and spreading them at the top. Put another pillow (preferably square) across the top; by this arrangement the whole back is supported. A Nightingale, or bed-jacket, should be put on the patient before lifting her up.

(2) Foot-Strap.—Fold a sheet diagonally into a bandage about eight or ten inches wide, place around the soles of the feet (when a patient is sitting up in bed) and fasten the ends at either side to the head of the bed or around the back-rest. Bed socks should be put on the feet or a pad placed between the feet and the sheet to keep them warm.

(3) Circular Pillow for Supporting the Knees.—Tie a thin oblong pillow together, about four inches from either end, so as to make a roll of it. Leave about a yard of bandage on each side; place the pillow under the knees and tie these ends about the sides of the bedstead to keep the pillow in place.

(4) Method of Supporting a Heart Case.—Place in front of the patient a wooden bed tray (a table tray with feet or supports), on this put a soft pillow so that the patient can rest her arms on it. Put a pillow at her back, and, if necessary, one under either elbow.

3. A Croup Tent.

Place a clothes horse around (three sides) a child's crib, cover the top with a blanket, letting it come down in front, within a foot and a half of the mattress. Pin other blankets to this one to form the sides and back; then fold a blanket and pin it in front so that it can be lifted or opened back to observe the child or regulate the temperature. Place a spirit lamp in a wash basin or a chair beside the crib, over this put a kettle of water, having the spout of the kettle connected by a heavy paper funnel with the interior of the tent.

4. Method of Washing a Bed Patient's Hair.

Have ready two small rubber sheets, a bath towel, three small towels, two basins, a pail or jar for waste water, a large jug or can of warm water, a small jug, a nail brush, a sponge or wash cloth, borax or ammonia, green or other *fluid* soap and a little non-absor-

bent wool or cotton. Have the patient lying on her side, face inwards, bring her head to the edge of the bed and see that the pillow is under her shoulder, not merely under her head. Cover this pillow with one of the rubber sheets, bring the lower edge of this rubber around the patient's neck and pin it together with a safety pin. Spread over this rubber a small, soft towel, tucking its edges between the rubber and the patient's neck. Cover the patient's shoulder and the top part of the bed clothes with the bath towel. Make the other rubber into an improvised Kelly pad, rolling one end over and over, then folding over and tucking in the sides. Put this pad under the patient's head, having the loose end in a basin on a chair beside the bed. Have this basin half full of water, to which add two drachms of borax or one of ammonia. Put the non-absorbent in the patient's ears, gently wet the head with the sponge or cloth, sprinkle with the soap and wash thoroughly, using the nail brush and also rubbing the scalp with the fingers. Then rinse the hair by pouring on water from the little jug, changing or emptying the basin when necessary. When the hair is clean and free from soap rinse with *cool* water, carefully remove the improvised pad and dry thoroughly. When partially dry, the hair may be spread out over the rubber sheet that is covering the pillow.

F. Madeline Shaw, (R. N., New York),
Graduate Montreal General Hospital.

STATE REGISTRATION.

There is one aspect of state registration that has of late been pressing itself on my mind, and that is its great importance, because of the fact that Canada uses the United States so much as a field for her graduates to practise in. To make certain of this enquiries have been made of the superintendents of the Training Schools of the Province, as to how many of their graduates have gone to the United States of America. Though quite confident that numbers went over the border, it has been rather startling to find the percentage from many of our town hospitals, for it is the schools of the towns and smaller cities which send by far the larger quota. As nothing could be more convincing than to present the answers to many of my enquiries I shall proceed to do so.

From Stratford: "Fifty per cent. of our graduates have left for the United States." From Cornwall: "Seventy-five per cent. of the graduates of this institution are practising in the United States." From Sarnia: "About half our nurses go across the border to nurse." St. Catharines: "Looking over the names of the graduates of this school I find that at least half have at one time or another taken up work in the States." Belleville General

Hospital: "About one-fifth of the graduates of the B. G. H. are nursing in the United States." St. Joseph Hospital, London: "About one in ten." Woodstock: "Eleven in the United States, eleven in Canada." Lady Stanley Institute, Ottawa: "Graduates number nineteen, twelve are in the United States." Nichols Hospital, Peterboro: "Twenty-four nursing, and twelve of these are in the United States." Guelph General Hospital: "One-third of the graduates are practising in the States." Marine Hospital, Owen Sound: "One-third are practising in the U. S. A." Brantford: "I am quite safe in saying sixty per cent. of our nurses have gone to the U. S. A. to practice." Berlin and Waterloo Hospital: "About thirty per cent."

I may not occupy space in more quotations, but surely we can come to but one conclusion, viz., that our Province graduates more nurses than she requires for home work, and that the United States is a very acceptable field for many of them. Then is it not all-important if we mean to keep up our standing, that we see to it that our nurses are as fully equipped as any trained in the most advanced State.

We have heard over and over that Canadian women are well thought of as nurses wherever they are found. Then train them thoroughly, make a registration test of as high a character as the highest—one that falls below that is of no value—and so send them forth equal to the best in our own or any other land. Let us not be content with low attainmens, but strive for "the top of the ladder."

The States of New York, Connecticut, New Jersey, Maryland, Virginia, Colorado and California have all secured bills. In these States our nurses must be below par without registration. Many other States are preparing the way for legislation. Does there not seem a danger that in the near future the more intelligent young women, of the class that have been coming forward, to study in our smaller schools, will go to the United States to take their training, when the curriculum will have in view the registration test, and for us, will be left, the less far-seeing and capable. Indiana, Michigan, Massachusetts, Illinois, Pennsylvania, have all had their bills defeated as have we. But they are keeping up the fight, and so will we; keep it up until we win.

They say British soldiers never know when they are beaten, but just keep pegging away. A body of Canadian nurses, we will take a leaf out of their book and keep at it, and at it.

What can we do to help on our good cause? Two practical things have been suggested: Every superintendent of a training school whose graduates go to the United States to practise, can educate her board as to the importance of having their nurses registered graduate nurses before they leave their own country, so that they will not be obliged to take an examination in the United States before having an equal standing with United States graduates.

Chapters or branches of the "Graduate Nurses' Association of Ontario" might be formed in all hospital towns and cities, where graduates and undergraduates might keep abreast of the times concerning registrations, and might make most helpful and useful plans to further our great aim.

CHARLOTTE E. EASTWOOD.

THE PRELIMINARY COURSE AT THE LAKESIDE HOSPITAL OF CLEVELAND.

Our preliminary course at the Lakeside covers six months.

Besides the lectures from physicians on Bacteriology, Anatomy, Physiology and Materia Medica, we take up Nursing Ethics, Household Economics (including the cost of all hospital supplies and appliances), Bandaging, Dieteties and First Principles of Nursing The probationers are also given a short course of lectures on Pharmacology by our chemist and a talk on Ventilation, Heating and Plumbing by our own engineer.

In so far as the principal has the oversight of the questions given on examination, they are confined to the mechanical phase of the work. Our pupils are not asked to use their judgment in matters pertaining to the treatment or care of the sick.

The probationers are taught by their supervisor in the class room and by practical demonstration in the wards how properly and intelligently to care for the sick, but the only work in the way of nursing that they do in the wards is the bathing of one patient each day, the feeding of helpless patients and the making of empty beds.

Those on duty on the wards have the dusting of the wards, sunrooms and lavatories, the care of the linen rooms and the serving of soft diet trays and liquids.

The dressings are all made by the probationers under the supervision of a competent instructor. They each serve a term in the operating supply room where they learn the methods of sterilization and the making of solutions.

They do the work of the diet kitchen under the supervision of a teacher.

They are on duty six and a half hours a day and are given one or two classes a day, usually in the afternoon. They are required to take notes of all lectures and these are regularly examined.

BERTHA M. TOYE.

Lakeside Hospital, Cleveland.

ST. ANTHONY, Oct. 14th.

"I am now at my eighth, and I hope last, stopping place, on my way to Hanington; if it is as difficult to get away from there as it is to go I think I shall make up my mind to stay on the Labrador for the rest of my life. It is a most inaccessible place, no steamers call there, just trading schooners and fishing smacks from Quebec and Halifax, so that I have to depend upon the "Strathcona" to take me down. She is now making her second and last trip there for the season, for navigation will soon be closing. Dr. Grenfell has just closed the summer hospital at Indian Harbor, 200 miles north of Labrador, bringing the staff to this; the remaining workers, who were volunteers from the States and England, having gone home. We started yesterday morning for Hanington, but the boiler broke down and we may be delayed until Tuesday. It was fortunate it happened before we left the harbor, for at St. Anthony, which is on the extreme northeast corner of Newfoundland, the straits are 60 miles wide and the crossing is often very rough. As the Strathcona is a small boat without much accommodation and noted for its rolling properties, we do not anticipate having a very nice trip, for it is quite cold, wet and windy with frost at night. We expect to take a week to reach Hanington, which is 200 miles southwest of here, for we have several places to call at, and it will not be safe to steam at night, the shore is so dangerous.

SS. STRATHCONA,
STRAITS OF BELE ISLE, Oct. 21st, 1906.

I know that when you read this letter you will be disappointed, but hope you will say I am doing the only possible thing, and advancing Dr. Grenfell's work more this way than I could this year in any other. If I could have telegraphed or written to you from Hanington for instructions, I would have done so, but the facilities

*Extracts from letters received from Miss Mayou, Victorian Order Nurse at Dr. Grenfell's Hospital at Hanington, Canadian Labrador.

are nil, there will not be another mail until next January, and the telegraph office is closed with the fishing season. When we got to Hanington on Thursday we found that the building was up, the carpenters having left for St. John's, 700 miles away, the day before; but that was all, then there was no equipment of any kind, neither furniture, furnishings, food, fuel or heating apparatus, so that it would have been utterly impossible to have taken in any patients with no means whatever of feeding, warming or caring for them. No one not on the spot can realize the immense difficulties to be contended with in building and equipping an institution situated as Hanington is, cut off from communication with the outside world.

1st. The very inadequate mail service, only eight during the year, four in the winter from January to May by dog komatik, and four in the summer by little open sail boat, which brings the letters 100 miles from Boune Espérance where the steamer leaves them.

2nd. The uncertain means of transportation, no steamers call there, except the Strathcona twice and the Government boat once a year, everything has to be taken by the trading schooners from Quebec, 900 miles; Halifax, 500 and St. John's, 700 miles away.

The summer working season is so short that it is marvellous so much should have been done, for the foundation had to be blasted out of the solid rock and every single thing used brought from St. John's. You cannot buy even a pin at Hanington, for there is not the slightest attempt at a shop, everything is bought from the trader's vessels in exchange for the fish. Dr. Grenfell and Dr. Hare talked the matter over and decided that as conditions are it would be better for me not to stay at Hanington, where there would be nowhere for me to live and no hospital work for me to do, but to spend the winter at St. Anthony, the third of Dr. Grenfell's hospitals and where extra help is very much needed for the efficient carrying on of his work this winter. He has quite an industrial establishment there, for in addition to the hospital are the orphanage, the workshop, where weaving, spinning and basket making are taught upstairs, and carpentering down, a fox farm, a Belgian hare run and a pigeon cote. A winter there will make me very much more efficient and treble my usefulness to Hanington, for the following year, for I am going to learn all those industries and introduce them at Hanington. Dr. Grenfell's object and desire is not only to treat the bodies, but to teach the people how to uplift themselves and have other occupations than simply fishing, which, until he came, was all they had, and meant being idle for eight months of the year and starving if the summer catch was poor. We expect to reach St. Anthony to-morrow week. Dr. Grenfell is calling at several places on the way, giving medical, spiritual and industrial aid. We hear the people at Lancia Loup are starving, not having caught any fish this year; he will help them.

SPECIAL NOTICE.—A post graduate course in district nursing will be given in the Home of the Victorian Order of Nurses, Ottawa. Apply to Miss Allen, 578 Somerset Street, Ottawa.

The Guild of Saint Barnabas

"Je le pansay; Dieu le guarit." [I tended him; God healed him.]
—*Ambroise Paré*

Canadian District

MONTREAL.—St. John Evangelist, third Tuesday, 8.15 p.m.
District Chaplain—Rev. Arthur French, 1773, Ontario Street.
District Superior—Miss Stikeman, 216, Drummond Street.
OTTAWA.—The Cathedral, First Monday.
Chaplain—Rev. Canon Kitson, the Rectory.
Local Superior—Miss L. C. Wicksteed, 494, Albert Street.
TORONTO—St. James' Cathedral Rectory, last Friday, 8 p.m.
Chaplain—Rev. Canon Edward A. Welch, St. James' Cathedral Rectory.
Local Superior—Mrs. Welch.
Secretary—Miss Maud Roger, 5 Howland Ave.

A meeting of the Guild of St. Barnabas for Toronto was held on October 26th, when four associates were admitted to membership. A suggestion was made to have the meetings on the last Friday of the month, alternately afternoon and evening. After discussing the matter a vote was taken, and it was decided to try this.

It has been decided by the District Council in Montreal, at their meeting in October, that nurses not belonging to the Church of England can become honorary members with all the privileges of the Guild, paying honorary membership fee, $1.00, and also for *Misericordia*, sixty cents a year.

In the Toronto Branch there are now twenty-two members, six associate members and four honorary members.

The November meeting was held as usual on November 30th, at St. James' Rectory. The hour of meeting was 3.00 p.m., and after the service in the chapel of the Rectory, at which the office of the Guild was said by the chaplain, the Rev. Canon Welch, a business meeting was held, and then the Guild enjoyed the kind hospitality of the Superior, Mrs. Welch.

The next meeting will be held in St. James' Rectory on Friday, January 4th, at 8.00 p.m., at which it is hoped that every member of the Guild will surely be present, to begin the New Year. It will be understood (see above) that nurses not belonging to the Church of England will be welcomed as associate members and honorary members. Application may be made to the Secretary, Miss Roger, 5 Howland Avenue. The annual subscription for members and associate members is sixty cents, which includes the subscription to the Guild paper, *Misercordia*.

My Scallop-Shell of Quiet

GIVE me my scallop-shell of quiet,
My staff of faith to walk upon,
My scrip of joy, immortal diet,
My bottle of salvation,
My gown of glory, hope's true gage;
And thus I'll take my pilgrimage.

Blood must be my body's balmer;
No other balm will there be given;
Whilst my soul like quiet palmer
Travelleth toward the land of Heaven;
. . . . . .
My soul will be a-dry before,
But, after, it will thirst no more.

—Sir Walter Raleigh.

"A Happy New Year."

LOYAL AND LOVING.—Purge out of every heart the lurking grudge. Give us grace and strength to forbear and persevere. Offenders, give us the grace to accept and forgive offenders. Forgetful ourselves, help us to bear cheerfully the forgetfulness of others. Give us courage and gaiety and quiet of mind. Spare us to our friends, soften us to our enemies. Bless us, if it may be, in all our innocent endeavors. If it may not, give us the strength to encounter that which is to come, that we be brave in peril, constant in tribulation, temperate in wrath, and in all changes of fortune, and down to the gates of death, loyal and loving one to another.—*R. L. S.*

THE ONLY WAY TO LIVE.—"Have we the courage to do God's will, cost what it may; to be generous, to give, to fight, to toil, to deny ourselves, seeking no reward save that of knowing that we do His will? It is the only way to live. 'Not everyone that saith Lord, Lord, shall enter into the Kingdom of Heaven, but he that doeth the will of My Father who is in Heaven.'"

From a sermon preached to the Catholic Nurses' Guild, Convent of the Visitation, Harrow-on-the-Hill, by the Very Rev. Prior MacKinlay, O.S.B. —The Catholic Nurses' Magazine.

WORK REMAINS.—"Let us correct the sad thoughts by the thought of the permenance of work. Prosper thou the *work* of our hands. Feelings pass, thoughts and imaginations pass; dreams pass; work remains. Through eternity, what you have done, that you are. They tell us that not a sound has ever ceased to vibrate through space; that not a ripple has ever been lost upon the ocean. Much more is it true that, not a true thought, nor a pure resolve, nor a loving act, has ever gone forth in vain."

So then we will end our year.

F. W. ROBERTSON.

The Canadian Nurse

COMMITTEE ON PUBLICATION:

Miss Mitchell, 198 Bleeker Street, *Convener.*

Miss Lennox, 11 Hamberside Ave. Miss Hargrave, 380 King Street West.

Miss Christie. Miss Beam, 12 Selby Street. Miss Hodgson.

Miss Gordon, Presbyterian Hospital, Chicago.

Miss Devellin, 505 Sherbourne Street. Miss Donnelly, 608 Church Street.

Miss Mathieson, The Isolation Hospital. Miss Hamilton, 505 Sherbourne Street.

Miss Julia Stewart, 12 Selby Street. Miss Crosby, 12 Shelby Street.

Miss Butchart, 44 Robert Street. Miss Bowerman, 551 Snerbourne Street.

COLLABORATORS:

Miss Chillman, Supt. General Hospital, Stratford, Ont.

Miss Shepherd, Supt. General Hospital, Guelph, Ont.

Miss Scott, Asst. Supt. Hartford Hospital, Hartford, Conn.

Miss J. Christie, Cleveland, Ohio.

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Mrs. Paffard, 26 Isabella St., Toronto.

Miss F. Sharpe, Supt. General Hospital, Woodstock, Ont.

Miss Gregory, Supt. St. Luke's Hospital, St. Louis, Mo.

Miss Mollie Stuart, Supt. Marion Sims Sanitarium, Chicago, Ill.

Miss Crawford, 233 Kennedy Street, Winnipeg, Man.

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Miss Lawder Sutherland, Supt. Hartford Hospital, Hartford, Conn.

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EDITOR:

Miss Helen MacMurchy, M.D., 133 Bloor Street East, Toronto.

The Editors will always be glad to receive MSS. These should be written on one side of the paper only. A margin should be left, and the number of words indicated on each page. Articles accepted will be paid for on publication. Please send MSS on the 1st of each month.

Vol. III. TORONTO, JANUARY, 1907. No. 1

Editorial.

A HAPPY NEW YEAR.

To all our friends, new and old, near and far, we offer our best congratulations and good wishes for the New Year. The Publication Committee, soon to be merged into a large and representative Editorial Board, heartily thank the Canadian profession and the Canadian public for the enthusiastic and kindly support and approval which has enabled us to surmount all difficulties and become a Monthly Journal worthy, we hope, of the profession and of Canada, and worthy of still more enthusiastic and loyal support.

THE GUILD OF ST. BARNABAS FOR NURSES.

It is difficult to express in words the feelings with which almost all nurses whom we have ever known regard in their hearts the religious aspect of their daily work. One cannot stand close beside the mysteries of Life and Death or see, as one does in a hospital, the changes and chances of this mortal life, without remembering that the things that are seen are temporal, but the things that are not seen are eternal, and longing that Almighty God would so teach us to number our days that we may apply our hearts unto wisdom.

It has great significance to the student of history, as well as to the student of medical science, to observe that the earliest hospitals were in connection with religious orders and the earliest nursing work was done as a religious vocation, as, in many cases, both under vows and not under vows, it is still.

The management of this magazine, and the associations of which it is the official organ, have always been in sympathy with this aspect of professional work. The meetings of the O. G. N. A. are opened with prayer. There is scarcely a hospital under the charge of any church in Canada, either Catholic or Protestant, where we have not subscribers. For these and other reasons, it is with feelings of hope and gratitude that we announce to our readers the opening of another new department in THE CANADIAN NURSE—The Guild of St. Barnabas, under the charge of the officers of the Canadian district in Montreal, Ottawa and Toronto. A brief history of the Guild will be found in THE CANADIAN NURSE for March, 1906, to which we hope all our readers will refer. The meetings of the Guild in Toronto are delightful and helpful. The brief religious service in the quiet of the Rectory Chapel, and the influence of the meeting itself, will not willingly be missed by any one who has once enjoyed them. We hope a number of new members from other churches, as well as the Church of England, will join after the new year.

THE VICTORIAN ORDER OF NURSES OF CANADA.

It is with no little pride and satisfaction that we open this month a new department in THE CANADIAN NURSE. Founded by Lady Aberdeen at the time of the Jubilee of her late Majesty, Queen Victoria, bearing her name, and bearing, too, the impress of her affectionate and benevolent character, the Victorian Order of Nurses has proved itself a boon to the people of this country, especially in the new and far distant places where the pioneers have but few to care for them in accident and sickness, and in our large cities where the problems of a crowded and foreign popula-

tion are beginning to press. The department will be conducted by Miss Allen, of Ottawa, Chief Lady Superintendent of the V. O. N., and we extend to her and to the new department of the magazine a cordial welcome on behalf of every member of the Publication Committee and every subscriber of the magazine.

OUR TWIN IN CALIFORNIA.

We are delighted to hear that *"The Nurses' Journal of the Pacific Coast"* is to be a monthly, beginning with the first number of Vol. III., Jan., 1907. Says the editor: "Our very courage in assuming the responsibilities which this work will entail may be due to our very limited experience. However, we have voted to publish the *Journal* monthly, and we must work with the determination to make it a success.

"We want a publication that will be more useful to our readers than in the past. We need more contributions on practical subjects and regular contributions to the departments represented. Members of the California State Nurses' Association, remember, this is *your Journal*, and its success or failure in fulfilling its mission rests with you. If you have the true "California spirit" do your part to make the *Journal* valuable and interesting.

"The Editors earnestly request that all material be sent in regularly before the 1st of each month, beginning with December, 1906."

That is just what we were going to say to our own readers. It is all TRUE, and all success to the *California Nurses' Journal.*

THREE BRAVE DEEDS.

In August, at Douglas, in the Isle of Man, two nurses of the Southport Isolation Hospital, saved the life of a lady who was seized by cramps and was drowning.

About the same time also Lady French, at Aldershot, presented the medal of the Society for the Protection of Life from Fire, to Mrs. Jones, a graduate of the Louise Margaret Hospital, who had rescued a little child in a fire that broke out on the drivers' quarters of the A.S.C.

And a few days after the nurses of the Throne Hospital of Belfast where a bad fire broke out, by their courage and presence of mind, saved all their patients, thirty children, many of them helpless, carrying them out through the dense smoke and fire. Many a deed as brave as these three, done by nurses, is unknown except to Almighty God, but thank God, we sometimes hear of them and they "encourage the others."

Before we could publish this article there came the news of three brave Canadian nurses succouring the wounded in a railway collision, near Paris, France, showing such common sense, courage and heroism that Paris was full of their praises. We have been requested by the ladies themselves to say nothing, and this reference is necessarily brief. The three ladies were Miss Coleman and Miss Monroe, graduates of the Boston General Hospital, and Miss Hogie, a graduate of the Massachusetts General Hospital.

Editorial Notes.

Miss Snively's Report.—A recent issue of the British Journal *of Nursing* publishes in full Miss Snively's Annual Report (T.G.H.) to which we referred in our last issue, together with a kind and complimentary editorial reference.

A Great Benefactor.—By the death of Mr. George Herring, the millionaire, London hospitals lose a most generous friend. To the Hospital Sunday Fund, and in other channels,, he had given a million dollars. He was a man of charming modesty, settled contentment (both before and after riches came), and genuine kindness.

The Nurses' Missionary League.—The League held a delightful Reunion in the C.M.S. house in Salisbury Square on Oct. 2nd, the object being to begin the winter's work and say a kind good-bye to four nurses about to leave for foreign service, two in India and two in China.

The Nurses and the Prime Minister.—The Society for the State Registration of Trained Nurses is now organizing a petition to the Prime Minister praying that the Government will bring in a Bill to Register Trained Nurses. All enquiries should be addressed to Miss Mary Burr, 431 Oxford St., London W. We are very much interested in this proposal inasmuch as the Publication Committee of THE CANADIAN NURSE has been considering the very same question and earnestly requests instructions and advice upon this subject from all subscribers, all Nurses' Associations and all others interested in the subject.

The Locked Bath-Room.—We learn from *The Hospital*, that "the committee of a large hospital in the provinces" decided to have the bathroom doors locked because the nurses desired to have a bath every day, and this "luxury" cost 30 s. a week for the entire staff. "What fools these mortals be!" The Medical Board, on being appealed to, ordered the locks to be removed. We never, in the course of a somewhat long life, heard anything like this before!

The Contributors' Club.

INDIA, September 12, 1906.

DEAR MISS CHRISTIE,—It is so good to have an old patient bring in some relative or friend of hers, who is frightened to death of white people, and especially of their medicine, and say, "You have done me so much good will you cure this one," and then she will persuade her friend to come and be examined and treated, and all the time telling not to be afraid, that we are not going to hurt her whatever. Some of them insist on having the doctor use the stethoscope to whatever part of the body is paining, such as a rheumatic knee or abscess in the breast. If the stethoscope has been used and the pulse felt, then the patient is sure that the doctor knows what is the cause of the trouble. Another one will come in and tell her woes over two or three times, until the doctor wishes her many miles out of sight, especially when very busy, but no, that will not do, the doctor must explain two or three times, then the nurse must, and finally the patient returns to the doctor so as to tell her (the doctor) correctly what the trouble is. Then the story has to be listened to again and explanations concerning her trouble, the cause and so forth, and finally the directions about medicine and treatment have to be given again. If it should be an operation case then, after all this has been gone through, the men take a day or two to decide whether the woman is worth having the operation performed or whether they can do without her in the home. If they can do without her she is allowed to come.

Sometimes a case comes in and is ready to be operated on, but this is seldom. The day has to be propitious or else the patient will die. Even the hour of the day has to be considered. With one caste certain hours are unlucky, in other castes other hours are unlucky. If a patient is dying the friends usually ask to take her away before she dies, as it is unlucky for her to die in our hospital (in a white person's place).

We have three trained nurses and seven in training. They all have to be watched and we have to be continually teaching them almost the same things every day. They have a very poor memory for details. But when one considers the homes from which they come and limited education, they do very well. We are trying to get the better educated girls, but they have to be taught very carefully. We have only forty-two beds in the white hospital, there are three wards and two private wards. Our private wards are nearly always occupied by Europeans.

At the end of this year we hope to be able to get out an illustrated report of our hospital and its work, a copy of which I will send you. I'm sure you will be interested to see the cuts.

This last month in our out-patients we had 1,239 new patients,

3,388 treatments given, 131 visits made in town, 83 new patients in the wards, 16 large and 91 minor operations, including both out-patients and in-patients and obstetrical. The operations are not as many as in May. The obstetrical work is increasing slowly.

I'm afraid this is not as interesting to you as to one who knows or rather has seen the work, but it will give you an idea of the trials that have to be overcome and the patience and tact required to get along with them. I intended when I commenced this letter to write something for the journal, but am afraid this will not do. If you think that there is anything that would be of interest to your readers you are at liberty to print what you think best.

Yours most sincerely,

L. M. H.

Correspondence.

DEEP SEA MISSION HOSPITAL,

ST. ANTHONY, NEWFOUNDLAND, Nov. 14, 1906.

DEAR MISS HARGRAVE,—Your letter of October 5th I received yesterday. It was forwarded to me here, which will be my winter quarters until June, when, as soon as the Straits are clear of ice, I shall go to Hanington to open the new hospital, the fourth belonging to this Mission, but on the Canadian Labrador. It was not ready in October when I went there, so I shall be here until next June, when navigation opens again and there is once more communication with the outside world.

We get letters here once every two weeks from June until the end of December, by the mail steamer from St. John's, then just four times by komatik, a light sled drawn by dogs, until the steamer can come in again.

I have had requests from four different magazines for articles upon Dr. Grenfell's work on the Labrador. I will try to send you something before navigation has completely closed to the ice-breaking mail steamer. It takes the dogs so long to come from Quebec, they cannot do more than from forty to fifty miles a day, and have to travel between 800 and 900 miles, so they carry nothing but letters. If I had time I could write pages and pages upon the work of the Mission, it has so many phases and does such an immense amount of good that it is worthy of all support. I am sorry that I shall not be able to attend any more of your meetings. I hope you will be able this session to frame and pass a satisfactory Bill.

Yours sincerely,

EDITH MAYOU.

Hospital and Training School Department.

IN CHARGE OF MISS HARGRAVE, TORONTO; MISS CRAWFORD, WINNIPEG; AND MISS YOUNG, MONTREAL.

Miss Florence Beck, graduate M. G. H., has given up her flat at "The Salisbury," and is now living at the Club.

Miss Kathleen Brock, M.G.H., has returned to Montreal to resume private work, and has taken up her residence at the M. G. H. Club, 59 Park Avenue.

Miss Moffatt, graduate M. G. H., has returned to Montreal, and is doing private nursing. It gives us great pleasure to welcome back one of our nurses of such high standing.

On Wednesday, November 14th, Dr. MacMurchy and Miss Mitchell were the guests of the M. G. H. Nurses' Club at dinner. Miss Mitchell was also the guest of the Club till November 15th, when she left for Caledonia Springs.

The visit we had last month from Dr. MacMurchy, editor of The Canadian Nurse, and Miss Mitchell, Convener, was a very great pleasure and treat to all those who had the opportunity of hearing and meeting them. Their intense interest and convincing enthusism in the the work they are trying to put forward, was extremely stirring and highly appreciated.

On Tuesday evening, November 13th, Dr. MacMurchy and Miss Mitchell, spoke at a meeting of the Canadian Nurses' Association. On Wednesday, November 14th, Dr. Ritchie England entertained our visitors to lunch, after which they attended a meeting of the M. G. H. Graduate Nurses' Club, at Montreal General Hospital.

Dr. Maude Abbott gave a luncheon party for Dr. MacMurchy on Tuesday, November 13th, and asked the following ladies to meet her: Lady Drummond, Miss Livingston, Miss Henderson, Miss Mitchell (Toronto), Mrs. Sherwood, the Misses Barker, Finley, Young, Hall, Aitken, Lewis, Parker, Shaw, Gilmour. In the afternoon of the same day Lady Drummond invited the same ladies to tea and gave them the treat of seeing some of the beautiful pictures at her residence.

The Training School of Nurses of the Montreal General Hospital have added, since October 1st, an important feature to its curriculum, that of teaching the probationer, by demonstration, the simple principles of nursing before she is placed in the hospital ward. This preliminary course is included in the probationary period and forms part of the regular three years' course. Miss F. M. Shaw, a gaduate of the Montreal General Hospital Training School, and holding the diploma of the Teachers' College, Columbia University, New York, has been appointed to this important post of instruction.

PORT HOPE will probably soon have a hospital.

A CATHOLIC hospital is to be erected at Saskatoon, Sask.

THE new hospital at Melfort, Sask., is approaching completion.

A LARGE addition is being made to the McKellar Hospital at Fort William.

MISS M. S. MACAULAY is in charge of the new Cottage Hospital at Virden, Man.

MRS. M. L. JARDINE has been appointed Night Supervisor at the H. S. C., Toronto.

THE John H. Stratford Hospital, at Brantford, is to have a new Nurses' Home, to cost $10,000.

MISS ETHEL NOBLE, graduate G. and M. H., Owen Sound, is visiting at her home in Bolton.

THE Railway and Marine Hospital at Port Arthur, is erecting a new building, at a cost of $40,000.

MISS UNDERHILL (H.S.C.) has just been appointed nurse in charge at the Aged Women's Home, Toronto.

MISS M. EMMA YOUNG (class of 1906), has been appointed Night Superintendent in Toronto General Hospital.

IT is expected that the new building for the Holy Cross Hospital at Calgary, Alberta, will be finished this month.

MISS REGAN, a graduate of St. Michael's Hospital, has taken a position in the Chester Hospital, West Chester, Penn.

MISS JENNIE SMITH, graduate of Grace Hospital, Toronto, has taken charge of Dr. Bird's Hospital, Blind River, Algoma.

MISS DAISY BROWNE, graduate, H. S. C., '02, Toronto, has been appointed operating room nurse in the Hartford Hospital.

MISS GLADYS OWEN, graduate Kingston General Hospital, has taken the position of Parish Nurse in connection with St. James' Cathedral, Toronto.

THE Board of Trustees of the G. and M. Hospital, Owen Sound, are making every effort to secure sufficient funds to build a large addition to the hospital in 1907.

MISS MCISAACS, graduate T. G. H., has gone to Edmonton to take charge of the hospital there. Miss Sargent has accompanied Miss McIsaacs as assistant.

MISS M. R. MACDONALD has resigned her position of Superintendent of the Victoria General Hospital, Halifax, and leaves early in January to visit friends in the United States.

MISS A. WALKENSHAW, graduate H. S. C., Toronto, has resigned her position in Lakeside Hospital, Cleveland, O., and intends doing private work in Toronto.

Miss E. Archer has resigned her position as Superintendent of the Moosomin Hospital.

Miss Pomeroy has taken up work in connection with the Victorian Order of Nurses in Montreal.

Miss Mary Gray has been doing post-graduate work in the operating theatre of the H. S. C. during the last five weeks.

Miss Edith Gamble, a recent graduate of the V. P. H., Fredericton, N.B., is engaged in private nursing in Duluth, Minn.

Miss Whitmarsh has returned to the Superintendency of the Fenwick Sanitarium, Abbeville, La., after an absence of two years.

Miss A. Sims has returned to hospital work, and has been appointed Superintendent of Memorial Hospital, Morristown, N.J.

Miss Anton, who has had charge of private wards in the Royal Victoria Hospital for over five years, has left for her home in Ireland.

Miss Margaret A. Cringle has recently been appointed Third Assistant in the Training School for Nurses, Toronto General Hospital.

Miss M. Jones, who has had charge of the preliminary course in the Presbyterian Hospital, Chicago, has taken charge of the Grant Memorial Hospital, Columbus, Ohio.

The Trustees of the V. P. H., Fredericton, N.B., have had the "Asa Dow Wing," for contagious diseases, enlarged and improved. The building was ready for use by the end of November, with accommodation for both public and private ward patients.

We have learned with great regret of the serious illness of Mrs. Strachan (Miss Gladstone), at her home in Fort William. Dr. J. F. W. Ross, with his usual kindness, went to Fort William for a consultation for her benefit.

Miss Purdy, Head Nurse of the Pavilion, T. G. H., has improved in health and has gone to spend Christmas at her home in Kincardine. Miss Stirling, who accompanied Miss Purdy, will spend Christmas at her home in Goderich.

For the first time the School of Nursing in connection with Toronto General Hospital has issued a calendar, which will be found of great interest by all concerned. It contains much important information.

Of the class of nurses who graduated in June last from St. Joseph's Hospital, London, Ont., all have settled down to work in the city, with the exception of Miss E. Cummins, who accepted a position in the Skene Sanitarium, Brooklyn, N.Y. These nurses have been very steadily employed since leaving the hospital and are very much encouraged by the success they have met with thus far. Early in the new year a class of six will graduate.

Miss McLeod, graduate Kingston General Hospital, has gone to take charge of the Parry Sound Hospital. Miss Hamer, a graduate of St. Michael's Hospital, Toronto, takes charge of the operating room.

Miss Florence G. Ashton, whose essay won the prize of $75.00 offered by the Alumnæ Association to the Graduating Class of the Lakeside Hospital, Cleveland, is a Canadian, and the daughter of the principal of the Indian School on the Mohawk Reserve, near Brantford.

Miss Eugenia Belleperche, graduate St. Joseph's Hospital Chatham ('06), has taken up private nursing in the city for a time. Miss Edith McCrie, a graduate of the same school ('04), has been ill with typhoid fever. Her friends will be pleased to hear she has recovered and is convalescing at her home in Mandacemin, Ont.

Two notable appointments have just been made in New York. Miss Goodrich, Superintendent of the New York Hospital Training School for Nurses has been appointed Inspector of Bellevue and five other large city hospital training-schools; and Miss Alline has been appointed Inspector of Training-Schools for the State of New York. We congratulate both ladies, and wish them great success in their new and very important positions.

The new Nurses' Residence at the Royal Victoria Hospital is fast approaching completion, and the Superintendent, Miss Henderson, looks forward to its occupation by the nurses at an early date. The effects of the recent fire at the Royal Victoria will not only be overcome by the new buildings, but the hospital will, in the end, be in a greatly improved position, so far as accommodation and equipment is concerned. The new rooms for hydrotherapy are admirable in their plan and equipment.

The graduating exercises of the Hamilton City Hospital were held in the Nurses' Residence on November 15, 1906. The following nurses received their diplomas and badges: Barbara Simpson, Hamilton, Ont.; Esther Evans, Hamilton, Ont.; Etta McLeay, Watford, Ont.; Josie Mayne, Woodstock, Ont.; Beatrice Harvey, Hanley, Sask.; Margaret Hickey, Woodstock, Ont.; Edna Storms, Violet, Ont.; Rosa Branscombe, Hanley, Sask.; Millie Hanham, Wellandport, Ont.; Wilhelmina Adam, Hamilton; Mary Cumberland, Alliston, Ont.; Jennie Quinsey, Hamilton; Anna Hennessey, Hamilton; Mabel Dunlop, Hamilton.

The new wing at the Western Hospital, Toronto, to be known as the Alexandra Wing, was formally opened on Wednesday, November 28th. A reception, which was very much enjoyed, was given by the Board of Governors and the Ladies' Board. Dr. Augusta Stowe-Gullen took occasion to ask for the interest and support of the friends of the hospital for the new Nurses' Home, which it is hoped will be erected in the near future, and for which a considerable sum has already been subscribed.

The Aluminæ Association of the Hospital for Sick Children, Toronto, intend to hold an informal open meeting on January 10, 1907, at 3.00 p.m., in the Nurses' Residence. Music, readings and an address from the President, Miss Hamilton, will form the programme. Tea will be served at 4.30.

THE many friends of Miss Souris (T.G.H., 1897), will learn with great regret of her untimely death on December 10th. An operation for the temporary relief of pain and distress was performed while she was in a private ward at T. G. H., but as nothing further could be done, Miss Souris returned to her home, accompanied by her two nurses. With all her wonted courage and cheer Miss Souris unselfishly and bravely bore what few could bear, and died as she had lived, a heroine.

A NEW story is being added to the Nurses' Home at Montreal General Hospital, which will make the building much more complete and comfortable. A large part of this great hospital has been rebuilt, or newly erected, in recent years. It is a most interesting place to see. One of the first things to attract the attention of a stranger is a brass tablet to the left of the spacious entrance hall, which records the noble generosity of Mr. George Chetwoode Hamilton, who, "dying at an early age, and in a foreign land," left to the hospital one hundred thousand dollars.

ON December 1, Miss Snively, Lady Superintendent and Superintendent of the Training School for Nurses, Toronto General Hospital, completed twenty-two years' service in that onerous and responsible position. There are few indeed who have discharged so long such arduous duties, and fewer still who have done so much as she for the advancement of the profession. THE CANADIAN NURSE would offer to Miss Snively the kindest congratulations on the anniversary, and express the hope that she may long be spared to continue her faithful and devoted and very valuable services to the profession and to the community.

THE annual meeting of the Nurses' Alumnæ Association of the Kingston General Hospital was held at the hospital on May 15th, 1906. The officers elected for the year were: Hon. President, Miss Gordon; President, Mrs. Tilly; First Vice-President, Miss Veale; Second Vice-President, Miss Draper; Secretary-Treasurer, Mrs. Nicol; Assistant Secretary, Miss Patterson; Convener of Surgical Supply Cupboard, Miss Wilson, assisted by all the members of the Alumnæ. In the report of 1905 mention was made of the Alumnæ Association's efforts to establish a library in connection with the Nurses' Home. Many donations of books have been received. A donation from Mrs. Mowat is deserving of special mention. At a garden party held in the hospital grounds in June, 1905, $84.00 was realized. This amount has been placed to the credit of the Nurses' Home Fund. A donation of $5.00 from Mrs. Wartman, Colebrook, has been credited to the same fund. During the year five new members joined the Association.

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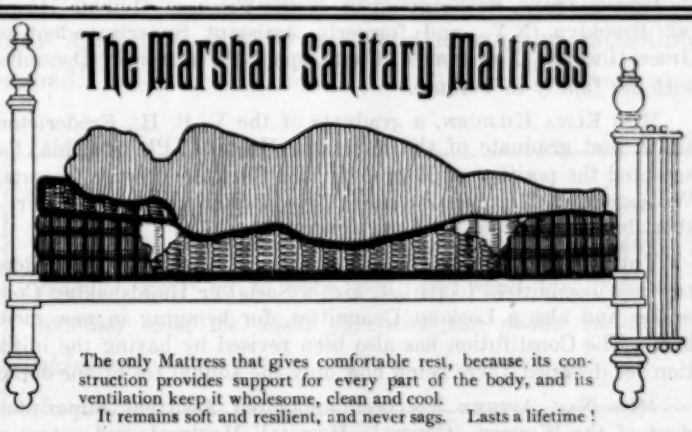

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Miss Brent, Superintendent H. F. S. C., Toronto, will spend her vacation with her niece, Mrs. Millspaugh, Los Angeles, Cal. Miss Brent expects to be away for six weeks.

Miss Jean Pearce, graduate, St. Joseph's Hospital, Chatham, is at present visiting her sister in San Francisco. She intends later to take up her work there.

Miss B. Gauld, of Winnipeg, graduate, G. and M. H., St. Catharines, has recovered from an attack of typhoid fever, and is back at work again.

Miss Snively is At Home to the graduates of the T. G. H. on the evening of the first Tuesday of each month. The idea is to encourage the friendly relations existing between the nurses and their Alma Mater.

At the last meeting of the Alumnæ Association of the T. G. H. it was decided to make all the Missionary Nurses from the school honorary members of the Association.

Miss Edna Ponde, who graduated in November from the Chipman Memorial Hospital, St. Stephens, N.B., has accepted a position in Mrs. Richard's private hospital, at Fredericton, N.B. She will take up her new duties on December 15th.

Miss Anna Dunn, graduate St. Joseph's Hospital, Chatham, has been ill with typhoid fever. Her many friends will be pleased to hear of her recovery and return to her home in the city, where she intends taking a much needed rest.

Miss Salmon, Superintendent of the Prospect Heights Hospital, Brooklyn, N.Y., and formerly Assistant Superintendent of Grace Hospital, New Haven, Conn., spent the month of December with her family in Toronto.

Miss Eliza Kilburn, a graduate of the V. P. H., Fredericton, and a post graduate of the Polyclinic Hospital, Philadelphia, has accepted the position of Matron for the Carleton County Hospital, Woodstock, N.B. She succeeds Miss Bolton, resigned, after a short but very successful term of service.

The Toronto General Hospital Alumnæ Association has added two new committees to its list, viz., a Social or Handshaking Committee and also a Lookout Committee, for bringing in new members. The Constitution has also been revised by having the initiation fee dropped, there being now only the annual fee of one dollar.

Miss Nan Aitken has been appointed Assistant Superintendent of the Western (General) Hospital, Montreal, and enters on her new duties January 1, 1907. The new Assistant Superintendent is a graduate of the Montreal Western General Hospital Training School, one of the training schools which is steadily coming to the front. The Superintendent is Miss Rahno Aitken (T. G. H.), formerly Head Nurse of the private wards in the T. G. H.

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TORONTO, CANADA

Miss K. Sullivan, graduate of H. S. C., '06, has accepted a position as Head Nurse in the Lakeside Hospital, Cleveland, O.

Miss Lewis, a graduate of the Royal Victoria Hospital, has been appointed Superintendent of Nurses at the Montreal Maternity Hospital. During the last year the new hospital has been opened and is situated on the corner of Prince Arthur and St. Urbain Streets, a very much better part of the city than that in which the old one was situated. Beside being a beautiful building, it is thoroughly well equipped, and under such conditions the work is sure to extend. Miss Lewis has been for nearly four years Assistant Superintendent of the Albany Hospital, and, added to this, has had experience in hospital work in both Cleveland and Baltimore.

A very pleasing event occurred at Guelph General Hospital on the afternoon of December 3rd, when Miss Sheppard, who has been for thirteen years Superintendent of the hospital, and is now Superintendent of the Berlin and Waterloo Hospital, was presented with an address and a purse of gold by the Ladies' Aid Association of the Hospital. The presentation was made by Mrs. Kenneth McLean, and the address read by Mr. W. E. Buckingham. Mr. Kenneth McLean replied on behalf of Miss Sheppard. The chair was taken by Dr. Kennedy, and among those present were Messrs. D. Guthrie, K.C., M.P.; Dr. Lindsay, Dr. Hobbs and J. P. Downey, M.P.P.

The members of the Alumnæ Association of the Royal Victorian Hospital had great pleasure in welcoming Dr. MacMurchy, editor of The Canadian Nurse, and Miss Mitchell, Convener of the Publication Committee to their monthly meeting, November 14th. Dr. MacMurchy spoke of her work, under the Ontario Government, for the feeble-minded. Great interest and sympathy was aroused by the recital of the troubles these patients fall into through their inability to protect themselves. Though the parents mostly prefer to keep these children at home, it is thought they would be far better if placed in an institution where they can have skilled care and be taught a useful occupation. Miss Mitchell asked the nurses to take a still greater interest in their magazine, The Canadian Nurse, also asked for practical help in their effort to make it a monthly issue. After the adjournment of the meeting the nurses had pleasant conversation with their visitors at the reception, showing that their interest had been thoroughly aroused.

The monthly meeting of the Alumnæ of the Winnipeg General Hospital Training School for Nurses was held on the first Wednesday of the month in the Nurses' Home sitting room at the General Hospital. The meeting was only fairly well attended, as many of those usually present were out of town, either in private homes or filling temporary positions in some of the many over-crowded hospitals throughout the West. The usual monthly business was transacted. The Alumnæ Register, open to all trained nurses in

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good standing, is in a flourishing condition. It was started in the fall of 1904 and now has 150 members. It is managed by Miss Sara McKibbon, who is also in charge of the Trained Nurses' Home on Langside street. A committee was appointed to arrange for a paper for discussion at each meeting. The starting of an Alumnæ magazine was talked of with much interest by those present, but finally the matter was left over until the next month. After the meeting was over Miss Wilson entertained those present to an informal afternoon tea, and a very enjoyable hour was spent.

THE Central Registry Committee is very much pleased that the CANADIAN NURSE is now to become a monthly, and extends congratulations to the Editor and staff on this marked evidence of their success. We know the members of the Central Registry will be pleased to see a monthly statement from the Registry. The Registrar's report on December 3rd showed the membership to be 221, with 4 applications to consider. There were 91 calls in November, 69 Registry, 22 personal. Amount in Bank, $314; on hand, $5; and $215 still owing Regictry from unpaid fees. During November the following nurses resigned to accept hospital positions: Miss McLeod (K.G.), Parry Sound; Miss Smith (G.H.), Blind River, with Miss Ashford (England) as assistant; Misses McIsaac and Sargent (T.G.H.), Edmonton; Miss Lawson (T.G.H.), Free Sanitarium, Gravenhurst; Miss Owen (K.G.), Parish Nurse for St. James' Cathedral. It is with feelings of sadness and deep regret that we record the death of one member of our Committee—Miss Haldenby—whose great interest and just, kindly judgment made her assistance invaluable.—B. Crosby, Convener.

THE Toronto Nurses' Social Club held its initial meeting in the Temple Building on the evening of November 21st, and although the evening was very stormy, there was a large attendance, especially of the undergraduates of the hospitals. Miss Brent, Superintendent of the Sick Children's Hospital, occupied the chair. Mrs. Scott-Raff, the principal of the Margaret Eaton School of Expression, lectured on "Self-Control," and all present, even the tired nurses from the hospitals, enjoyed the talk. Mrs. Raff thinks we are much indebted to the Greeks for our ideals of self-control, for the poise and serenity which the art of their best period reveals to us. To study the mystery of our own bodies, to gain control of the mind as well as the body, to develop the body through proper culture, are aims worthy of the highest endeavor. When the art of Greece became decadent rough athletics took the place of the better and finer culture and a lower form of physique prevailed. Rome, who borrowed all that was best in Greek art, fell still further, and the wrestling of the athletes degenerated into mere gladiatorial contests. Since the human race has sought and found God in Nature it is saner, and wiser, and healthier, more symmetrically developed, mentally, morally and physically. Self-

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consciousness is the cause of nervousness and nervous prostration. To forget self and work for others is a cure for nervousness. The child who heard her mother give a passage from Robert Louis Stevenson, according to the Boston style of elocution, thought her mother ill, but when the same lines were given "naturally" she saw the beauty of them and wanted to learn them too. A bouquet of chrysanthemums was presented to Mrs. Scott-Raff after the lecture, on behalf of the club. The musical part of the programme was furnished by Dr. Rolph, who gave a violin solo, accompanied on the piano by Miss Houston. Refreshments were served later, and thus the "Social Club" made its first effort to promote sociability among the nurses resident in the city. The lectures are held in Court Room No. 2 of the Temple Building on the evening of the third Wednesday of each month. Rev. Mr. Welch, agent of the Bible Society, gives the next lecture, and in January Mr. J. Ross Robertson, that good friend to the children and the nurses, gives a Travel Talk.

The Tenth Annual Meeting of the Canadian Nurses' Association was held in Y. W. C. A. library on Tuesday evening, October 2.

The reports of Secretary-Treasurer and Registrar were read, and showed an increase of the work done during the year. There were 1,160 registrations, and we have filled 1,036 cases, 90 of which were out of town. In the months of July and August the calls could not nearly all be attended to, owing to a lack of nurses. This is no new experience, however, as we are never able to cope with the summer work.

Last year our members numbered 220, and a few extra were added during the year. This year we begin our work with a smaller membership, owing to the fact that some members have been married, others are about to be, and several have taken up institutional work in the city or other places, to all of whom we wish success and happiness in their new fields of work or rest.

We have to record with deep regret the loss by death of one of our members, Miss Fair, a graduate of the M. G. Hospital. She was always much interested in the work of the Association, and we shall miss her greatly.

Six lectures were delivered during the winter, which were greatly appreciated by those who were able to attend, and our thanks are due the doctors for their kindness in delivering them. Dr. George Fisk on "Insurance," Dr. Nicholl on "Typhoid," Dr. Day on "Blood," Dr. Garrow, on "The Duties of a Nurse," Dr. Abbott, on "The Heart," Dr. D. Grey, on "Obstetrics."

By the kind consent of the Governors of McGill University, Dr. Maud Abbott was able to give us her lecture in the Pathological Department of McGill. The subject, "The Human Heart in Health and in Disease," was most interesting, and she showed us numbers of specimens of this important organ.

We have been obliged to look for a hall in which to hold our

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meetings, and have found it most difficult to procure just what we require. In our dilemma the doctors very kindly came to our relief, and have allowed us to use the rooms of the M. C. Society, for which we owe them a debt of gratitude.

Last year we started a Sick Benefit Fund, which the members will find helpful.

In November we had the great pleasure of having Dr. Helen MacMurchy and Miss Mitchell, of Toronto, with us. The former gave us a most interesting address, which will act as a stimulus to greater things to all who had the privilege of hearing it. We were also much pleased to hear Miss Mitchell's report of the growth of THE CANADIAN NURSE, and wish it every success. We shall welcome it with pride as a monthly magazine.

MARRIED.

HONEYWELL—BRYANS.—On Wednesday, November 21st, at Halifax, N.S., by the Rev. Thomas Fowler, Etta Bruce Bryans, of Toronto, to Dr. William Honeywell, Hunter River, P.E.I.

AT the Church of the Redeemer, on October 31st, Mr. A. E. Bell to Miss Annie Campbell (H. S. C.).

BIRTHS.

WILSON.—At Woodstock, Ont., in November, a son to Mrs. Bert Wilson (née Campbell). Mrs. Bert Wilson was a graduate of the G. and M. H., St. Catharines.

OUR strength grows out of our weakness. Not until we are pricked and stung and sorely shot at, awakens the indignation which arms itself with secret forces. A great man is always willing to be little. Whilst he sits on the cushion of advantages he goes to sleep. When he is pushed, tormented, defeated, he has a chance to learn something; he has been put on his wits, on his manhood; he has gained facts; learns his ignorance; is cured of the insanity of deceit; has got moderation and real skill.

The wise man always throws himself on the side of his assailants. It is more his interest than theirs to find his weak point. Blame is safer than praise. I hate to be defended in a newspaper. As long as all that is said is against me, I feel certain of success. But as soon as honeyed words of praise are spoken for me, I feel as one that lies unprotected before his enemies. In general, every evil to which we do not succumb is a benefactor.—Ralph Waldo Emerson.

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Official Department.

WINNIPEG GENERAL HOSPITAL TRAINING SCHOOL FOR NURSES.—LIST OF GRADUATES.

1889.

Birtles, Eleanor, at home, Alexander.
Birtles, Sarah, superintendent Brandon Hospital.
McDougall, Jessie, private nurse, Edmonton, Sask.
Laidlaw, Margaret C. (now Mrs. A. Clark), Dublin, Ireland.
McVicar, Margaret, at home, Ontario.

1890.

Clinton, Mrs. A. G., matron of home, Kamloops, B.C.
McKay, Isabella (now Mrs. J. Mole), British Columbia.
Todd, Mrs. J. R. (now Mrs. Bullock), West Selkirk, Man.
Barber, Harriet (now Mrs. Graham), Winnipeg.

1891.

Inkster, Agnes, private nurse, Winnipeg.
Simpson, Marion G., private nurse, Victoria, B.C.
Moore, Isabella (now Mrs. Cheshire), Winnipeg.

1892.

Kennedy, Caroline, private nurse, Winnipeg.
Richards, Ada, private nurse, New York.
Holland, Bessie (now Mrs. A. W. Moody), Winnipeg.
Ransford, E. M. A., deceased.
Scott, A. H. L. (now Mrs. Calder), private nurse, Winnipeg.
McLachlan, Annie, head nurse, Sanitarium, Banff.

1893.

Monteith, Rachel (now Mrs. Scarth), Griswold.
May, Frances, matron, Hospital, Charleston, N.C.
Mowat, Margaret (now Mrs. Stephens), Greenwood, B.C.
Russell, Lizzie (now Mrs. (Dr.) McInnes), Neepawa.
Holt, Sarah, matron, Hospital, Golden, B.C.
Lethbridge, Isabel, private nurse, California.
Thompson, Marion, at home, Edinburgh, Scotland.
Thompson, Ella (now Mrs. W. J. Osborne), Winnipeg.
Whiting, Louise (now Mrs. Arthur Smith), Montreal.

1894.

Young, Nellie, at home, Liverpool, England.
Fleming, Martha.
Richardson, Zella, private nurse, Winnipeg.
Miller, Florence (now Mrs. Bowman), Lethbridge.

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1895.

Tait, Alice, staff nurse, Brainerd, Minn.
Francis, Rea, private nurse, Winnipeg.
Smith, May, private nurse, Vancouver, B.C.
Bunn, Isabella, private nurse, Selkirk.
Earle, Ellen (now Mrs. Gowan), private nurse, Vancouver, B.C.
Driscoll, Minnie (now Mrs. Fox), Kinbrae, Sask.
Elliot, Marie, surgical nurse, General Hospital, Vancouver, B.C.
Brown, Annie (now Mrs. Snider), Portage la Prairie, Man.
Holgate, Carrie (Mrs. (Dr.) Anderson, Brandon), deceased.
Burnham, Susan (now Mrs. Pollock), Maple Creek.
Davies, Edith (now Mrs. Williams), England.
Griffith, Henrietta (now Mrs. McDougall).
Picken, Elizabeth, private nurse, Vancouver.

1896.

Harries, Harriet, private nurse, Winnipeg.
Baker, Frances (now Mrs. Gough), Moosomin.
Sykes, Agnes, at home, Cranbrook, B.C.
Bennett, Emily (now Mrs. (Dr.) Andrews), Minnedosa.
Richards, Mabel (now Mrs. (Dr.) Young), Vancouver, B.C.

1897.

Membery, Ida, at home, Toronto.
McBride, Margaret (now Mrs. F. Morse), Winnipeg.
Picken, Sareta, private nurse, Vancouver.
Wilson, Jean (now Mrs. Alex. Wiley), Almonte, Ont.

1898.

Shepard, Violet (now Mrs. Goodbun), Shellmouth, Man.
Clark, Louise M. (Mrs. G. H. Moody, Lincoln Park), Winnipeg.
King, Maud (now Mrs. (Dr.) Brown), Carman, Man.
Stewart, Helen (now Mrs. Thomas), Deloraine.
Madge, Kathleen M., private nurse, Winnipeg.
McKibbon, Sara, private nurse, Winnipeg.
Youhill, Edith, private nurse, Winnipeg.
Fogarty, Rachel N., Superintendent Hospital, Bloemfontein, S.A.
Smith, Helen C., Superintendent Nurses' Home, New York.
Gilroy, Ethel, private nurse, Winnipeg.

1899.

Benson, Frances M. (Mrs. D. H. McDonald), Fort QuAppelle, Sask.
Wilson, Fredericka, Lady Superintendent, Winnipeg General Hospital.
Matheson, Jean, Superintendent Hospital, Kamloops, B.C.
Ross, M. M., private nurse, New York City.
Bodington, Helena B. (now Mrs. Meiklejohn), Calgary, Alta.
Markley, Annie L., head nurse, St. Luke's Nursing Home, Vancouver.
Murton, Emma, private nurse, Chicago.
Newton, Ada C. (now Mrs. White), masseuse, Winnipeg.
McLeod, Mrs. Clara, private nurse, Winnipeg.

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1900.

Bolster, Fanny (now Mrs. Dutton), Vancouver, B.C.
Teeple, Ella R. (now Mrs. (Dr.) Irving), Yorkton, Sask.
Armit, Christina (now Mrs. (Dr.) Conklin), Vancouver, B.C.
Lumsden, Edith E., Assistant Lady Superintendent, Winnipeg General Hospital, Man.
McLennan, Kate (now Mrs. (Dr.) Carter), Boissevain, Man.

1901.

Sanford, Etta, Night Superintendent, Winnipeg General Hospital.
Alexander, M. I. W. (now Mrs. Adam), Prince Albert.
McCreight, Jessie (now Mrs. (Dr.) Harrington), Dauphin.
Anderson, Kate (Mrs. Atkinson), Trail, B.C.
Hood, Clara M., private nurse, Winnipeg.
Abbott, Estelle, private nurse, Winnipeg.
Witherspoon, M. Jean (now Mrs. (Dr.) Thompson), Regina, Sask.
Macdonald, Flora S. (now Mrs. Musgrave), Regina.
Kidd, Mary, Superintendent, Hospital, Fernie, B.C.
Brown, Annie L. (now Mrs. (Dr.) Hill), Swan River.
Fogarty, Mary A., private nurse, Winnipeg.
McBride, Elizabeth, The Hospital, Michel, B.C.

1902.

McKay, Annie B., private nurse, Grand Forks, N.D.
Duncan, Francis M. (now Mrs. (Dr.) Burridge), Winnipeg, Man.
Shedden, Margaret (now Mrs. Bowles), Vancouver, B.C.
Brown, Kate McP. (now Mrs. Blasdale), Winnipeg.
Jones, Ada (Mrs. (Dr.) McGavin), Plum Coulee, deceased.
Snider, Mrs. Laura K., at home, Portage la Prairie.
Johns, Mary Ethel, staff nurse, Winnipeg General Hospital.
Lamont, Elizabeth, private nurse, Winnipeg.
Snider, Gertrude (Mrs. W. J. G. Stevens), Winnipeg.
Pattinson, Elizabeth (now Mrs. Dunning), Moosomin, Sask.
Duncan, Mary A., private nurse, Winnipeg.
Dodd, Mary A. (now Mrs. R. W. Coulthard), Fernie, B.C.
McFarlane, Kate, staff nurse, Fernie, B.C.
Stewart, Katherine, post graduate course, Memorial Hospital, New York.
Owens, Annie, General Hospital, Moosomin, Sask.
Cross, Agnes (now Mrs. (Dr.) Creighton), Melita.
Stewart, Isabel M., private nurse, Winnipeg.
Hodgins, Hattie (now Mrs. Watt), Arcola, Sask.

1903.

Venables, Lucy, Superintendent General Hospital, Carman, Man.
Riddle, Sarah, private nurse, Winnipeg, Man.
Hilton, Alice (now Mrs. (Dr.) Wadge), Winnipeg.
Tinling, Margaret (now Mrs. McCarthy), Halifax, N.S.
Callin, Josie, private nurse, Vancouver, B.C.
Law, Ada, private nurse, Cranbrook, B.C.

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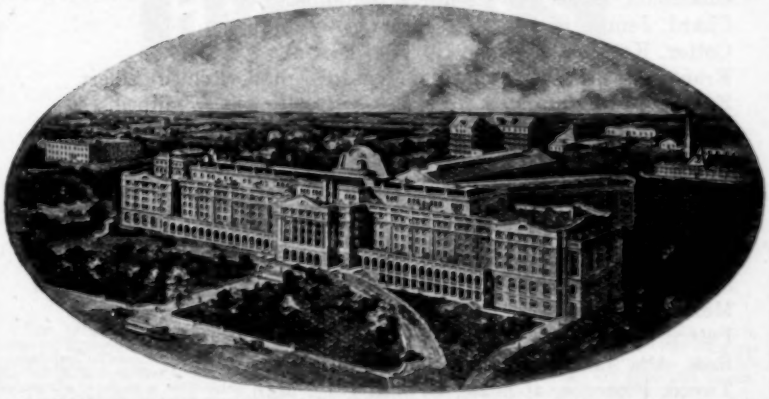

This institution offers a three-years' course of instruction. In addition to the usual subjects taught in hospital training schools, special attention is given to all branches of physiologic therapeutics, including hydrotherapy, radiotherapy, phototherapy, kinesitherapy, or manual Swedish movements and massage.

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MRS. MARY S. FOY, Superintendent

McKinley, Sarah, Superintendent, Hospital, Medicine Hat, Sask.
St. John, Edith (now Mrs. (Dr.) Cameron), Carlyle.
Edmonds, Retta, Mission Hospital, Tabor, Sask.
Connors, Kathleen, private nurse, Cleveland, Ohio.
Asher, Bella J., private nurse, Winnipeg.
Howard, Penelope (now Mrs. (Dr.) Lang), Tabor, Sask.

1904.

Park, Marion (now Mrs. (Dr.) Wark), Moosomin, Sask.
Baird, Emily (Mrs. Reynolds), Calgary, deceased.
Cassady, Jean (now Mrs. (Dr.) Lyall), Carberry.
Fisher, Isabella, private nurse, Winnipeg.
McMillan, Minnie, private nurse, Winnipeg.
Webster, Jean, private nurse, Winnipeg.
Hayward, Maud (now Mrs. (Dr.) McKee), Killarney.
McIntosh, Lizzie, at home, Prince Albert.
Hickie, Dora, private nurse, Winnipeg.
Shaw, Annie M. (now Mrs. Simpkins), Regina, Sask.
Stiles, Matilda (now Mrs. (Dr.) Cooper), Winklor, Man.
Cochrane, Ethel, private nurse, Vancouver, B.C.
Beveridge, Eliza, district work, Margaret Scott Nursing Mission, Winnipeg.
Woodward, Annie, at home, Vancouver, B.C.
Barlett, Marion, in charge of operating room, Winnipeg General Hospital.
McKibben, Matilda, staff nurse, Winnipeg General Hospital.

1905.

Boyd, Mollie, private nurse, Winnipeg.
Champion, Ethel, private nurse, Winnipeg.
Chard, Jennie B. (now Mrs. Sparks), Winnipeg.
Cotter, Kate A., at home, Burlington, Ont.
Eraut, Victoria L., Superintendent, Hospital, Prince Albert.
Forrester, Lillian (now Mrs. F. G. Hamilton), Winnipeg.
Harris, Gertrude, private nurse, Winnipeg.
Hobbs, Ida F., private nurse, Edmonton, Alta.
King, Blanche Hampson (Mrs. (Dr.) Vrooman), Winnipeg.
King, Frankie M., private nurse, Vancouver.
Lowe, Edith M., private nurse, Winnipeg.
Miller, Minnie, private nurse, Winnipeg, Man.
McIntosh, Mary Elizabeth (Mrs. (Dr.) Stackpool), Cardston, Alta.
McLaurin, Annie L., private nurse, Winnipeg, Man.
Patten, Edith, staff nurse, Winnipeg General Hospital.
Ross, Ada Janet, private nurse, Winnipeg.
Tweed, Florence, at home, Crystal City, Man.
Warren, Mary J., private nurse, Winnipeg.

1906.

Lawford, Miss, staff nurse, Prince Albert, Sask.
Hermann, Emily, private nurse, Rainy River, Ont.

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Stewart, Eva, Prince Albert, Sask.
Stewart, H., private nurse, Winnipeg, Man.
Clearihue, E., private nurse, Winnipeg, Man.
Bell, M., staff nurse, Michel, B.C.
Pentland, Miss, staff nurse, Regina, Sask.
Jones, L., staff nurse, Regina, Sask.
Moreton, Miss, staff nurse, General Hospital, Battleford, Sask.
McBride, F., Superintendent, General Hospital, Battleford, Sask.
Harvey, D., staff nurse, General Hospital, Winnipeg.
Hines, H., staff nurse, General Hospital, Prince Albert, Sask.
Cobbe, M., staff nurse, General Hospital, Regina, Sask.
Armstrong, M.
Haffield, Alice, private nurse, Winnipeg, Man.
Blott, Nora, private nurse, Winnipeg, Man.
Browne, Maud, private nurse, Winnipeg, Man.
Cornett, Maggie, private nurse, Winnipeg, Man.
Harris, Emma, private nurse, Winnipeg, Man.
Fraser, J. Grant, private nurse, Winnipeg, Man.
Fraser, C. D., undergraduate, General Hospital.
Hilton, Rose, undergraduate, General Hospital.

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QUEEN ALEXANDRA'S IMPERIAL NURSING SERVICE.

November 15, 1906.

The following ladies have received appointments as staff nurses: Miss E. R. Collins, Miss L. A. Ephgrave, Miss K. F. Fawcett, Miss C. C. M. Gibb, Miss M. Ironside, Miss A. C. M. Jameson, Miss C. H. MacCarthy, Miss F. E. Morton, Miss G. H. Sellar, Miss E. H. Davies, Miss N. R. McNeil, Miss K. F. G. Skinner.

POSTINGS AND TRANSFERS.

Sister—Miss E. M. Pettle, to Military Hospital, Cairo, Egypt, from Military Hospital, Valletta, Malta.

Staff Nurse—Miss A. C. M. Jameson, to Connaught Hospital, Aldershot; on appointment.

APPOINTMENTS CONFIRMED.

Staff Nurses—Miss E. G. Barrett, Miss E. B. Darnell, Miss M. E. Brewer, Miss M. Fisher, Miss J. G. Dalton, Miss M. Graham.

The Editor,
THE CANADIAN NURSE,
133 East Bloor Street,
Toronto, Canada.

C. H. KEER,
Matron-in-Chief,
Q.A.I.M.N.S.

A RECENT number of the *Cleveland Medical Journal* contains three excellent papers by nurses on "The Alleviation of the Discomforts Following Anæsthesia," being three of the essays submitted by the class of 1906 at the Lakeside Hospital, Cleveland, for the prize of $75.00, given by the Alumnæ Association. The first of these, by Miss F. G. Ashton, won the prize, and the other two, by Miss MacRoberts and Miss Pillow, obtained honorable mention.

The Delineator for December is one of the first and most welcome of the Christmas magazines. It is hard to know what to read first, but most people will turn at once to "The Great Guest Comes," a poem by Edwin Markham. Then come Agnes and Egerton Castle's "A Young Conspiracy"; Anthony Hope's "The Duke's Allotment"; the Countess Von Arnhim's "Fraulein Schmidt and Mr. Anstruther," and all the usual and interesting special departments.

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HELENE BONSDORFF (Gymnastic Institute, Stockholm, Sweden).
LILLIE H. MARSHALL (Pennsylvania Orthopædic Institute).
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LOUISE MORSTATT (Flushing Hyspital, L.I., Hydriatic Institute, New York.).
HELEN T. WALKER, (St. Francis Xavier's Infirmary, Charleston, S.C.).

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